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APPLICANTS

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**** CONTINUING DATA *******

This application is a DIV of 10/230,059 08/29/2002
 which is a CIP of 09/537,118 03/29/2000
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**** FOREIGN APPLICATIONS *******

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NJ	SHEETS DRAWING 1 <input checked="" type="checkbox"/>	TOTAL CLAIMS 30 <input checked="" type="checkbox"/>	INDEPENDENT CLAIMS 3
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <input checked="" type="checkbox"/> <input type="checkbox"/>				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials		

ADDRESS

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TITLE

Buccal, polar and non-polar spray or capsule containing drugs for treating pain

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